


# Texas Education Agency Standard Application System (SAS)

<b>2017-2018 Perkins Reserve Grant</b>				
<b>Program authority:</b>	Title I, Part A, Carl D. Perkins Career and Technical Education Act of 2006, Public Law 109-270, Section 112(a)(1)			<b>FOR TEA USE ONLY</b> <small>Write NOGA ID here:</small>
<b>Grant Period:</b>	November 13, 2017, to August 31, 2018			<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED TEXAS EDUCATION AGENCY 2017 OCT 26 PM 1:27 DOCUMENT CONTROL CENTER GRANTS ADMINISTRATION </div>
<b>Application deadline:</b>	5:00 p.m. Central Time, September 26, 2017			
<b>Submittal information:</b>	One original and two copies of the application, printed on one side only and signed by a person authorized to bind the applicant to a contractual agreement, must be received no later than the aforementioned date and time at this address:  Document Control Center, Grants Administration Division Texas Education Agency, 1701 North Congress Ave. Austin, TX 78701-1494			
<b>Contact information:</b>	Diane Salazar: <a href="mailto:diane.salazar@tea.texas.gov">diane.salazar@tea.texas.gov</a> ; (512) 936-6060			
<b><u>Schedule #1—General Information</u></b>				
<b>Part 1: Applicant Information</b>				
Organization name	County-District #			Amendment #
Pine Tree ISD	092904			
Vendor ID #	ESC Region #			
1756002241	07			
Mailing address		City	State	ZIP Code
1701 Pine Tree Road		Longview	TX	75608
<b>Primary Contact</b>				
First name	M.I.	Last name	Title	
Carrie		Chandler	High School Assistant Principal	
Telephone #	Email address		FAX #	
903-295-5031 ext. 209	<a href="mailto:cchandler@ptisd.org">cchandler@ptisd.org</a>		903-295-5042	
<b>Secondary Contact</b>				
First name	M.I.	Last name	Title	
Daya		Hill	Assistant Superintendent of Curriculum and Instruction	
Telephone #	Email address		FAX #	
903-295-5000 ext. 125	<a href="mailto:dhill@ptisd.org">dhill@ptisd.org</a>		903-295-5004	
<b>Part 2: Certification and Incorporation</b>				

I hereby certify that the information contained in this application is, to the best of my knowledge, correct and that the organization named above has authorized me as its representative to obligate this organization in a legally binding contractual agreement. I further certify that any ensuing program and activity will be conducted in accordance with all applicable federal and state laws and regulations, application guidelines and instructions, the general provisions and assurances, debarment and suspension certification, lobbying certification requirements, special provisions and assurances, and the schedules attached as applicable. **It is understood by the applicant that this application constitutes an offer and, if accepted by the Agency or renegotiated to acceptance, will form a binding agreement.**

**Authorized Official:**

First name Teresa	M.I. J	Last name Farler	Title Superintendent of Pine Tree ISD
Telephone # 903-295-5022	Email address <a href="mailto:tfarler@ptisd.org">tfarler@ptisd.org</a>		FAX # 903-295-5004
Signature (blue ink preferred)		Date signed	

  
Only the legally responsible party may sign this application

10/25/17

**701-17-103-110**

**Schedule #1—General Information**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 3: Schedules Required for New or Amended Applications**

An X in the "New" column indicates a required schedule that must be submitted as part of any new application. The applicant must mark the "New" checkbox for each additional schedule submitted to complete the application.

For amended applications, the applicant must mark the "Amended" checkbox for each schedule being submitted as part of the amendment.

Schedule #	Schedule Name	Application Type	
		New	Amended
1	General Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Required Attachments and Provisions and Assurances	<input checked="" type="checkbox"/>	N/A
4	Request for Amendment	N/A	<input type="checkbox"/>
5	Program Executive Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	Program Budget Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7	Payroll Costs (6100)	See Important Note For Competitive Grants*	<input type="checkbox"/>
8	Professional and Contracted Services (6200)		<input type="checkbox"/>
9	Supplies and Materials (6300)		<input type="checkbox"/>
10	Other Operating Costs (6400)		<input type="checkbox"/>
11	Capital Outlay (6600)		<input type="checkbox"/>
12	Demographics and Participants to Be Served with Grant Funds	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13	Needs Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14	Management Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	Project Evaluation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17	Responses to TEA Requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18	Equitable Access and Participation	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**\*IMPORTANT NOTE FOR COMPETITIVE GRANTS:** Schedules #7, #8, #9, #10 and #11 are required schedules if any dollar amount is entered for the corresponding class/object code on Schedule #6—Program Budget Summary. For example, if any dollar amount is budgeted for class/object code 6100 on Schedule #6—Program Budget Summary, then Schedule #7—Payroll Costs (6100) is required. If it is either blank or missing from the application, the application will be disqualified.

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By TEA staff person:

**Schedule #2—Required Attachments and Provisions and Assurances**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 1: Required Attachments**

The following table lists the fiscal-related and program-related documents that are required to be submitted with the application (attached to the back of each copy, as an appendix).

#	Applicant Type	Name of Required Fiscal-Related Attachment
No fiscal-related attachments are required for this grant.		

#	Name of Required Program-Related Attachment	Description of Required Program-Related Attachment
No program-related attachments are required for this grant.		

**Part 2: Acceptance and Compliance**

By marking an X in each of the boxes below, the authorized official who signs Schedule #1—General Information certifies his or her acceptance of and compliance with all of the following guidelines, provisions, and assurances.

**Note that provisions and assurances specific to this program are listed separately, in Part 3 of this schedule, and require a separate certification.**

X	Acceptance and Compliance
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>General and Fiscal Guidelines</u> .
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>program guidelines for this grant</u> .
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with all <u>General Provisions and Assurances</u> requirements.
<input checked="" type="checkbox"/>	I certify that I am not debarred or suspended. I also certify my acceptance of and compliance with all <u>Debarment and Suspension Certification</u> requirements.

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**Schedule #2—Required Attachments and Provisions and Assurances**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 3: Program-Specific Provisions and Assurances**☒ I certify my acceptance of and compliance with all program-specific provisions and assurances listed below.

#	Provision/Assurance
1.	The applicant provides assurance that program funds will supplement (increase the level of service), and not supplant (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local funds. The applicant provides assurance that state or local funds may not be decreased or diverted for other purposes merely because of the availability of these funds. The applicant provides assurance that program services and activities to be funded from this grant will be supplementary to existing services and activities and will not be used for any services or activities required by state law, State Board of Education rules, or local policy.
2.	The applicant provides assurance that the application does not contain any information that would be protected by the Family Educational Rights and Privacy Act (FERPA) from general release to the public.
3.	The applicant provides assurances that they will continue to meet all Statutory Requirements as outlined in their 2017–2018 Perkins Formula Grant incorporated by reference.
4.	The applicant assures that its ability is to meet the 20% match requirement.
5.	Applicants applying for Focus Area 1, 2, or 3 provide assurance that the curriculum they develop will be appropriately aligned to marketable skills in the identified high-demand occupations. It may include industry recognized credentialing as part of the degree plan.
6.	Applicants applying for Focus Area 1, 2, or 3 provide assurance that the development and implementation of industry experiences, including mentorship programs, internships, externships, and/or apprenticeship, will expose students to applied learning and real-world work activities in the identified high-demand occupation(s).
7.	Applicants applying for Focus Area 1, 2, or 3 provide assurance that, within 90 days of the grant start, awarded applicants will submit a Memorandum of Understanding (MOU) detailing the relationship between the dual credit partner, the LEA, and business and industry partner(s).

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**Schedule #5—Program Executive Summary**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial.

Indicate the Focus Area for which you are applying. **Only one Focus Area may be selected per application, limit of two applications per LEA** (see Program Guidelines pages 8 and 11 for more information on eligibility requirements for each of the Focus Areas).

☐ Focus Area 1: Pathway Hubs, Rural Schools

☐ Focus Area 2: Pathway Hubs, Career Center Partnerships

☒ Focus Area 3: CTE Career Cluster

☐ Focus Area 4: Testing Site/Licensed Instructor

Based on industry predictions for our greater East Texas Area, 7 out of the top 14 career paths are in Health Science. It is our collective responsibility to equip our students with career-ready skill sets that are in high demand and will allow them to be successful in the workforce.

Our goal is to expand our Health Science offerings at the high school level with the purchase of the Health Science Career Labs from Paxton/Patterson. This program offers 17 different labs stations for students to learn hands-on skills with the latest technology in the areas of: biomedical engineering, emergency medical technician, environmental health and safety, forensics, health information management, medical imaging, clinical laboratory, mental health, nursing, pharmacology, sports medicine, therapeutic services, veterinary medicine, speech therapy, dentistry, ophthalmology, and biotechnology R&D. These labs would allow our students to earn certifications allowing them to go straight into the workforce or continue to a post-secondary degree.

Currently our Health Science Program of Study begins with students taking Principles of Health Science followed by Health Science Theory. The Program of Study culminates in students choosing between a hospital-based practicum or taking dual credit courses pursuant to a Bachelors of Nursing through a partnership with LeTourneau University.

This lab setting would allow us to strengthen our Health Science program by enhancing student skills that will transfer to on-site practicum courses. This program will enable students to earn multiple certifications required in the health science field by increasing our certification offerings from CPR and pharmacy technician to then include the following: certified nurse aid/assistant, certified patient care technician, clinical medical assistant, medical laboratory assistant, and phlebotomy technician making our students more marketable in the workforce. Students would then have the opportunity to enter the workforce or continue pursuing a post-secondary degree.

By integrating this lab setting as a part of our Health Science program of study, students will increase their knowledge and marketability and experience first-hand the teamwork and interpersonal skills necessary to succeed in the health science field.

This will allow students to determine if the health care profession is truly the right industry for them while still providing the opportunity to make changes to their programs of study as they explore their career interests.

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**Schedule #5—Program Executive Summary (cont.)**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial.

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By TEA staff person:

**Schedule #6—Program Budget Summary**

County-district number or vendor ID: 092904				Amendment # (for amendments only):		
Program authority: Title I, Carl D. Perkins Career and Technical Education Act of 2006, P. L. 109-270, Sec. 112 (a)(1)						
Grant period: November 13, 2017, to August 31, 2018				Fund code: 244		
<b>Budget Summary</b>						
Schedule #	Title	Class/ Object Code	Program Cost	Admin Cost	Total Budgeted Cost	Match
Schedule #7	Payroll Costs (6100)	6100	\$0	\$0	0	0
Schedule #8	Professional and Contracted Services (6200)	6200	\$2800	0	\$2240	\$560
Schedule #9	Supplies and Materials (6300)	6300	\$0	0	0	0
Schedule #10	Other Operating Costs (6400)	6400	\$2400	0	\$1920	\$480
Schedule #11	Capital Outlay (6600)	6600	\$51449.75	0	\$41159.80	\$10289.95
Grand total of budgeted costs (add all entries in each column):			<b>\$56649.75</b>	<b>\$0</b>	<b>\$45319.80</b>	<b>\$11329.95</b>
<b>Administrative Cost Calculation</b>						
Enter the total grant amount requested:					\$56649.75	
Percentage limit on administrative costs established for the program (5%):					× .05	
Multiply and round down to the nearest whole dollar. Enter the result.						
This is the maximum amount allowable for administrative costs, including indirect costs:					\$2832	

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**Schedule #7—Payroll Costs (6100)**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

Employee Position Title		Estimated # of Positions 100% Grant Funded	Estimated # of Positions <100% Grant Funded	Grant Amount Budgeted	Match
<b>Academic/Instructional</b>					
1					
2	Educational aide	0	0	0	0
3	Tutor	0	0	0	0
<b>Program Management and Administration</b>					
4	Project director	0	0	0	0
5	Project coordinator	0	0	0	0
6	Teacher facilitator	0	0	0	0
7	Teacher supervisor	0	0	0	0
8	Secretary/administrative assistant	0	0	0	0
9	Data entry clerk	0	0	0	0
10	Grant accountant/bookkeeper	0	0	0	0
11	Evaluator/evaluation specialist	0	0	0	0
<b>Auxiliary</b>					
12	Counselor	0	0	0	0
13	Social worker	0	0	0	0
14	Community liaison/parent coordinator	0	0	0	0
<b>Education Service Center (to be completed by ESC only when ESC is the applicant)</b>					
15					
16					
17					
18					
19					
20					
<b>Other Employee Positions</b>					
21	Title			\$	\$
22	Title			\$	\$
23	Title			\$	\$
24	Subtotal employee costs:			\$	\$
<b>Substitute, Extra-Duty Pay, Benefits Costs</b>					
25	6112 Substitute pay			\$0	0
26	6119 Professional staff extra-duty pay			0	0
27	6121 Support staff extra-duty pay			0	0
28	6140 Employee benefits			0	0
29	61XX Tuition remission (IHEs only)			0	0
30	Subtotal substitute, extra-duty, benefits costs			0	0
31	Grand total (Subtotal employee costs plus subtotal substitute, extra-duty, benefits costs):			0	0

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For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

<b>Schedule #8—Professional and Contracted Services (6200)</b>			
County-district number or vendor ID: 092904		Amendment # (for amendments only):	
<b>NOTE:</b> Specifying an individual vendor in a grant application does not meet the applicable requirements for sole-source providers. TEA's approval of such grant applications does not constitute approval of a sole-source provider.			
<b>Professional and Contracted Services Requiring Specific Approval</b>			
Expense Item Description		Grant Amount Budgeted	Match
6269	Rental or lease of buildings, space in buildings, or land		
	Specify purpose:	\$	\$
<b>a. Subtotal of professional and contracted services (6200) costs requiring specific approval:</b>		\$	\$
<b>Professional and Contracted Services</b>			
#	Description of Service and Purpose	Grant Amount Budgeted	Match
1	Installation/Setup and teacher training in the classroom prior to start of school	2240	560
2		\$	\$
3		\$	\$
4		\$	\$
5		\$	\$
6		\$	\$
7		\$	\$
8		\$	\$
9		\$	\$
10		\$	\$
11		\$	\$
12		\$	\$
13		\$	\$
14		\$	\$
<b>b. Subtotal of professional and contracted services:</b>		\$2240	560
<b>c. Remaining 6200—Professional and contracted services that do not require specific approval:</b>			
<b>(Sum of lines a, b, and c) Grand total</b>		<b>\$2240</b>	<b>560</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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**Schedule #9—Supplies and Materials (6300)**

County-District Number or Vendor ID: 092094

Amendment number (for amendments only):

**Supplies and Materials Requiring Specific Approval**

		<b>Grant Amount Budgeted</b>	<b>Match</b>
6300	Total supplies and materials that do not require specific approval:	\$0	0
<b>Grand total:</b>		<b>0</b>	<b>0</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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<b>Schedule #10—Other Operating Costs (6400)</b>			
County-District Number or Vendor ID: 092904		Amendment number (for amendments only):	
Expense Item Description		Grant Amount Budgeted	Match
6413	Stipends for non-employees other than those included in 6419	\$	\$
6419	Non-employee costs for conferences. Requires pre-authorization in writing.	\$1920	480
Subtotal other operating costs requiring specific approval:		1920	480
	Remaining 6400—Other operating costs that do not require specific approval:	\$	\$
<b>Grand total:</b>		<b>1920</b>	<b>480</b>

In-state travel for employees does not require specific approval.

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division [Administering a Grant](#) page.

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<b>Schedule #11—Capital Outlay (6600)</b>					
County-District Number or Vendor ID: 092904			Amendment number (for amendments only):		
#	Description and Purpose	Quantity	Unit Cost	Grant Amount Budgeted	Match
<b>6669—Library Books and Media (capitalized and controlled by library)</b>					
1		N/A	N/A	\$0	0
<b>66XX—Computing Devices, capitalized</b>					
2	Chrome Books	25	\$174.99	\$3499.80	\$874.95
3	Google Chrome Management Console License	25	\$35.00	\$700.00	\$175.00
4			\$	\$	\$
5			\$	\$	\$
6			\$	\$	\$
7			\$	\$	\$
8			\$	\$	\$
9			\$	\$	\$
10			\$	\$	\$
11			\$	\$	\$
<b>66XX—Software, capitalized</b>					
12			\$	\$	\$
13			\$	\$	\$
14			\$	\$	\$
15			\$	\$	\$
16			\$	\$	\$
17			\$	\$	\$
18			\$	\$	\$
<b>66XX—Equipment, furniture, or vehicles</b>					
19	Health Science Career Lab Station by Paxton/Patterson (13 of 17 Lab modules)	13	\$3500	\$36400	\$9100
20	Charging cart for Chrome Books	1	\$700	\$560	\$140
21			\$	\$	\$
22			\$	\$	\$
23			\$	\$	\$
24			\$	\$	\$
25			\$	\$	\$
26			\$	\$	\$
27			\$	\$	\$
28			\$	\$	\$
<b>66XX—Capital expenditures for additions, improvements, or modifications to capital assets that materially increase their value or useful life (not ordinary repairs and maintenance)</b>					
29				\$	\$
<b>Grand total:</b>				<b>\$41159.80</b>	<b>\$10289.95</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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**Schedule #12—Demographics and Participants to Be Served with Grant Funds**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 1: Student/Teacher Demographics of Population To Be Served With Grant Funds.** Enter the data requested for the population to be served by this grant program. If data is not available, enter DNA. Use the comment section to add a description of any data not specifically requested that is important to understanding the population to be served by this grant program. Response is limited to space provided. Use Arial font, no smaller than 10 point.

Student Category	Student Number	Student Percentage	Comment
Economically disadvantaged	542	44.2	Based on 2016-2017 TAPR
Limited English proficient (LEP)	68	18.65	Current 2017-2018 data
Attendance rate	NA	95.3%	Based on 2016-2017 TAPR
Annual dropout rate (Gr 9-12)	NA	0.4%	Based on 2016-2017 TAPR
Teacher Category	Teacher Number	Teacher Percentage	Comment
1-5 Years Exp.	2	2.4	2 Health Science instructors
6-10 Years Exp.		%	
11-20 Years Exp.		%	
20+ Years Exp.		%	
No degree		%	
Bachelor's Degree	2	2.4	2 Health Science instructors
Master's Degree		%	
Doctorate		%	

**Part 2: Students/Teachers To Be Served With Grant Funds.** Enter the number of students in each grade, by type of school, projected to be served under the grant program.

**School Type:** ☒ Public ☐ Open-Enrollment Charter ☐ Private Nonprofit ☐ Private For Profit ☐ Public Institution

**Students**

PK	K	1	2	3	4	5	6	7	8	9	10	11	12	Total
										87	78	76	77	318

**Teachers**

PK	K	1	2	3	4	5	6	7	8	9	10	11	12	Total
										2	2	2	2	2

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**Schedule #13—Needs Assessment**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 1: Process Description.** A needs assessment is a systematic process for identifying and prioritizing needs, with "need" defined as the difference between current achievement and desired outcome or required accomplishment. Describe your needs assessment process, including a description of how needs are prioritized. If this application is for a district level grant that will only serve specific campuses, list the name of the campus(es) to be served and why they were selected. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

After review of the recently adopted TEKS for Health Science, it was determined that our program needed a more rigorous hands-on approach to enhance the acquisition of skills necessary in the Health Care industry. According to information provided by the Longview Economic Development Corporation (LEDCE), 7 out of the top 14 local career paths are in the Health Care market. When comparing these industry projections with our current health science program, it became apparent that our students needed a greater variety of certification opportunities.

In discussions with our partnering universities (LeTourneau University, Kilgore College, and University of Texas at Tyler), local hospitals (Christus Good Shepherd and Longview Regional), and various local pharmacies, we were able to identify the crucial skills and certifications needed to keep up with the growing demand of health care professionals.

Currently our Health Science program services approximately 200 students; however, less than 5% of our students earn a health-care certification that will enhance their employability in the health care profession. Based on this information, increasing course offerings, certifications, and number of students served became the decisive factor for applying for the Perkins Reserve Grant.

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**Schedule #13—Needs Assessment (cont.)**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 2: Alignment with Grant Goals and Objectives.** List your top three to five needs, in rank order of assigned priority. Describe how those needs would be effectively addressed by implementation of this grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Identified Need	How Implemented Grant Program Would Address
1.	Increase Student Skills	The lab systems provide students opportunities to perform lab tests, diagnose, and treat a variety of illnesses and injuries. The lab can be adjusted electronically to create a variety of scenarios for students to work under.
2.	Increase Certifications	Skills learned through the lab will increase student knowledge base and better prepare them for certification exams. In addition it will expose them to greater variety of certification options based on their individual interest.
3.	Increase Course offerings for students	The lab setting will enable us to schedule more students through the lab and increase the number of students served in the courses.
4.		
5.		

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**Schedule #14—Management Plan**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 1: Staff Qualifications.** List the titles of the primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program, along with desired qualifications, experience, and any requested certifications. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Title	Desired Qualifications, Experience, Certifications
1.	Angel Cubine	Health Science Teacher, Bachelor of Science in Nursing
2.	Heather Siedel	Health Science Teacher, Bachelor of Science in Nursing
3.	Carrie Chandler	Assistant Principal, oversees CTE department at the High School
4.		
5.		

**Part 2: Milestones and Timeline.** Summarize the major objectives of the planned project, along with defined milestones and projected timelines. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Objective	Milestone	Begin Activity	End Activity
1.	Obtain Health Science Labs	1. Ordering of the labs	02/01/2018	02/28/2018
		2. Delivery of the labs	06/01/2018	06/15/2018
		3. Set up	06/15/2018	06/30/2018
		4. Teacher Training for labs	07/01/2018	07/07/2018
		5.	XX/XX/XXXX	XX/XX/XXXX
2.	Obtain Chrome books and charging cart	1. Ordering of Chrome Books	02/01/2018	02/28/2018
		2. Delivery of Chrome Books	05/01/2018	05/01/2018
		3. Set up by technology	05/01/2018	06/01/2018
		4. Training on Chrome Books for teachers	06/01/2018	06/15/2018
		5.	XX/XX/XXXX	XX/XX/XXXX
3.	Implement Program with students	1. Introduction of Classes	01/01/2018	03/01/2018
		2. Scheduling of Classes	04/01/2018	05/01/2018
		3. Monitor Certifications Earned	08/25/2018	07/31/2018
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
4.		1.	XX/XX/XXXX	XX/XX/XXXX
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
5.		1.	XX/XX/XXXX	XX/XX/XXXX
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX

**Unless pre-award costs are specifically approved by TEA, grant funds will be used to pay only for activities occurring between the beginning and ending dates of the grant, as specified on the Notice of Grant Award.**

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**Schedule #14—Management Plan (cont.)**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 3: Feedback and Continuous Improvement.** Describe the process and procedures your organization currently has in place for monitoring the attainment of goals and objectives. Include a description of how the plan for attaining goals and objectives is adjusted when necessary and how changes are communicated to administrative staff, teachers, students, parents, and members of the community. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

At the beginning of each school year, teachers are required to submit SMART goals as part of the teacher appraisal system. The goals are addressed in the pre-conference, instructional walk-throughs, formal observations, and post conference. Adjustments are made throughout the year to ensure that instructional practices are aligned to the district, campus, and teacher goals. Any program changes needed are communicated through district and campus leadership and carried out by department staff. Students, parents, and members of the community are informed of program offerings and changes through student and parent meetings, mail-outs, district websites, social media, and curriculum nights throughout the school year.

**Part 4: Sustainability and Commitment.** Describe any ongoing, existing efforts that are similar or related to the planned project. How will you coordinate efforts to maximize effectiveness of grant funds? How will you ensure that all project participants remain committed to the project's success? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

In addition to expanding our health science program of study, we are currently working with local industries to identify work-ready skills needed in high demand industries in our surrounding areas. At this time conversations are being had between several local school districts, industries, and institutions of Higher Ed to develop a community wide program to increase job-ready skills in the local workforce. With the current focus being on job-readiness, our continued support and sustainability of our proposed program is a priority. Our teachers and staff have been an integral part of developing the framework for this grant proposal.

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By TEA staff person:

**Schedule #15—Project Evaluation**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**Part 1: Evaluation Design.** List the methods and processes you will use on an ongoing basis to examine the effectiveness of project strategies, including the indicators of program accomplishment that are associated with each. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Evaluation Method/Process	Associated Indicator of Accomplishment	
1.	Increase student courses/opportunities	1.	Use Master Schedule
		2.	Monitor class enrollment
		3.	
2.	Increase Certifications Offered	1.	List of certifications for which we can prepare students
		2.	
		3.	
3.	Increase Student Certifications Earned	1.	List of certifications and verification of earned certificates through NCA
		2.	Student Certification Exam grades from NCA
		3.	
4.	Improve Student Skills	1.	Feedback from partnerships with Christus Good Shepherd, Longview Regional, LeTourneau University, and employees
		2.	Percentages of students earning certification on first administration
		3.	
5.		1.	
		2.	
		3.	

**Part 2: Data Collection and Problem Correction.** Describe the processes for collecting data that are included in the evaluation design, including program-level data such as program activities and the number of participants served, and student-level academic data, including achievement results and attendance data. How are problems with project delivery to be identified and corrected throughout the project? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Program activities will be monitored through teacher lesson plans, lab schedules, and Health Care Lab system modules. Participants will be monitored through class rosters and our School Information System (SIS), Skyward. Academic Data for the program will be monitored through student progress reports and grade reports from the SIS and teacher anecdotal records. Academic Data can also be monitored through the Health Care Lab system modules that tracks student module progress. The number of participants served will be monitored through class schedules and course selections. Attendance data will be monitored through our SIS (Skyward), teacher reports, and Lab modules. Problems identified by students, teachers, and administration will be brought to campus or department leadership to be addressed in the appropriate manner. Concerns with any attendance, academic, or curriculum delivery will be reviewed by administration and appropriate action will be put into place.

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 1:** Explain how the project identified the high-demand occupations and their related programs of study in partnership with the local workforce development board. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Our school district is in partnership with the Longview Economic Development Corporation in an effort to foster skills needed for industry. Through this partnership we hope to prepare students to enter the local workforce or enter post-secondary degree programs. Data provided by LEDCO shows that half of the top leading industries in our area are seeking graduates that have knowledge and skills in the Health Care Industry. Our goal in providing the Health Care labs will allow us to better prepare students for these specific skills and certifications that the current industry is in demand for.

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 2:** Describe how you will design at least one program of study that spans secondary and postsecondary education and includes an appropriate sequence of courses that are aligned with high-demand occupations identified by local regional workforce board. The program of study should build in rigor as students progress through high school. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Our Health Science Program of Study is as follows:

9 <sup>th</sup> grade year:	LeTourneau/Kilgore College Option (Dual Enrollment while in HS)
English I Pre-AP	Psychology 2013- LETU
Algebra I	Communication 1113- LETU
Biology Pre-AP	Clinical Issues, Biology 3921- LETU
World Geo Pre-AP	Medical Terminology, Biology 2032- LETU
Principles of Health Science	

10 <sup>th</sup> grade year:	
English II Pre-AP	Human Growth, Psychology 2143 - LETU
Geometry	Nutrition, Kinesiology 2913- LETU
Chemistry Pre-AP	
World History AP	
Health Science Theory (course to be enhanced through use of Health Care labs)	

11 <sup>th</sup> grade year:	<u>Nursing</u>
English III AP	Anatomy and Physiology, Biology 2011, 2013 - LETU
Algebra II Pre-AP	US History 1301, 1302- KC
US History AP	<u>Mental Health</u>
Practicum Health Science	Personality Theory, Psych 2163- LETU
World Health Research	Introduction to Philosophy, Phil 2013 - LETU
	US History 1301, 1302- KC

(This year students have two choices to pursue with our partnership with LeTourneau University. They can go into Nursing or Mental Health)

12 <sup>th</sup> grade year:	
English IV AP	English 1301, 1302- KC
Pre-Cal	Govt 2305, 2306- KC
Medical Micro	Math 1314, 1342- KC
Economics/Gov AP	Psyc 2033- LETU
Extended Practicum of Health Science	Practicum of Mental Health, Psyc 4933- LETU

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 3:** Provide a sample crosswalk that identifies postsecondary coursework that would be required of a student in the program of study in order to complete a certificate or receive an associate's degree from the partnering general academic teaching institution(s) within two to three years of graduating from high school. The crosswalk may also demonstrate how the project can lead to a bachelor's degree. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Our partnership with LeTourneau University allows students to take courses during their high school career that transfer into a degree plan towards a Bachelors in Science in Nursing. This opportunity affords students the chance to graduate in a shorter amount of time with a B.S.N., than traditional pathways.

The following is the degree planned offered currently for a BSN at LeTourneau University: Courses indicated with an asterick notate courses offered at Pine Tree High School.

General Education

English\* 1013

English\* 1023

Communication\* 1113

Biology\* 2013/2011

A&amp;P 1

Biology 2013/2021

A&amp;P 2

Civic Elective\*

Civic Elective\*

Math\* 1203 or 1423

In\_\_ Elective

Theology Courses

Bible 1033

Theology 1043

Bible/Theology Course

Bible/Theology Course

Nursing Prerequisites

Biology 2204

PSYC 2143\*- Human Growth and Development

KINE 2913\*- Nutrition

CHEM 1014- Chemistry for Health Science

NURS 3113- Pathophysiology

NURS 3132- Pharmacology

PSYC 2013\*- General Psychology

Major Nursing Courses

NURS 3453      NURS 3621      NURS 4413      NURS 3442

NURS 3412      NURS 3852      NURS 4423      NURS 4834

NURS 3421      NURS 3403      NURS 4613

NURS 3213      NURS 4733      NURS 4621

NURS 3823      NURS 4743      NURS 4753

NURS 3613      NURS 4413      NURS 4751

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**Schedule #17—Responses to TEA Program Requirements (cont.)**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 4:** Identify the partner organizations that will help carry out the grant. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. **Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Kilgore College, LeTourneau University, University of Texas at Tyler, Longview Regional Medical Center, Christus Good Shepherd

**TEA Program Requirement 5:** Identify at least one industry partner that will assist with curriculum development to support relevant and frequent industry experiences for students participating in the program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. **Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Longview Regional Medical Center and Christus Good Shepherd will continually assist in identifying skills needed in the Health Care setting. In addition they will be able to help guide us in how to teach the skills and provide opportunities for students to practice those skills in a practicum setting.

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 6:** Propose a sustainability plan to ensure that the school(s) will continue to meet the goals of the grant program after the end of the grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

The Health Science Career Labs consumable materials will last about a year and a half. After that time we will be able to use local and federal CTE funds to replenish supplies to sustain the program. Due to high numbers of student enrollment we do not anticipate or see any reduction or loss of staffing. Our partnerships with the local industries will strengthen as a result of our continued cooperation in providing students that are work-ready.

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 7:** List capstone industry certifications and programs of study that were identified in partnership with postsecondary, industry, or other LEAs. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Area 4 must address this question.**

Certifications:

Certified Nurse Aide/Assistant  
 Certified Patient Care Technician  
 Clinical Medical Assistant  
 Pharmacy Technician  
 Phlebotomy Technician

Programs of Study/Degree Plans:

Emergency Medical Technician- Kilgore College  
 Nursing: LVN/RN- Kilgore College  
 Radiologic Science- Kilgore College  
 Nursing, BSN- LeTourneau University  
 Psychology, BS or BA- LeTourneau University  
 Counseling, BS- LeTourneau University

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 092904

Amendment # (for amendments only):

**TEA Program Requirement 8:** Explain how the awarding of a Perkins Reserve Grant will complement the existing CTE program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

**Applicants applying for Focus Area 4 must address this question.**

Pine Tree High School offers numerous opportunities for students to pursue their career interest. Each program of study allows students to explore course work that will increase their knowledge and skill level as they progress towards industry certifications or post secondary programs.

The receipt of the Perkins Reserve Grant will allow PTHS to expand and enhance the medical program of study and increase the number of students who can be scheduled into the program. Over the past five years this has been the fastest growing program of study, beginning with less than one hundred students to now including over three hundred.

The Reserve Grant will purchase the Health Science Lab system and accompanying Chrome Books that will enable students to experience a more hands-on, skill based classroom environment. This will lead to a deeper understanding of course content as they prepare for certification exams or post secondary course work.

With the setup of these specific lab stations students will be exposed to simulations that provide an opportunity to practice those interpersonal skills needed for a career in the health science industry.

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**Schedule #18—Equitable Access and Participation**

County-District Number or Vendor ID:

Amendment number (for amendments only):

**No Barriers**

#	No Barriers	Students	Teachers	Others
000	The applicant assures that no barriers exist to equitable access and participation for any groups	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Barrier: Gender-Specific Bias**

#	Strategies for Gender-Specific Bias	Students	Teachers	Others
A01	Expand opportunities for historically underrepresented groups to fully participate	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A02	Provide staff development on eliminating gender bias	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A03	Ensure strategies and materials used with students do not promote gender bias	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A04	Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of gender	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A05	Ensure compliance with the requirements in Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of gender	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A06	Ensure students and parents are fully informed of their rights and responsibilities with regard to participation in the program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
A99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Cultural, Linguistic, or Economic Diversity**

#	Strategies for Cultural, Linguistic, or Economic Diversity	Students	Teachers	Others
B01	Provide program information/materials in home language	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B02	Provide interpreter/translator at program activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B03	Increase awareness and appreciation of cultural and linguistic diversity through a variety of activities, publications, etc.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B04	Communicate to students, teachers, and other program beneficiaries an appreciation of students' and families' linguistic and cultural backgrounds	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B05	Develop/maintain community involvement/participation in program activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B06	Provide staff development on effective teaching strategies for diverse populations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B07	Ensure staff development is sensitive to cultural and linguistic differences and communicates an appreciation for diversity	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B08	Seek technical assistance from education service center, technical assistance center, Title I, Part A school support team, or other provider	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B09	Provide parenting training	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B10	Provide a parent/family center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B11	Involve parents from a variety of backgrounds in decision making	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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**Schedule #18—Equitable Access and Participation (cont.)**

County-District Number or Vendor ID:

Amendment number (for amendments only):

**Barrier: Cultural, Linguistic, or Economic Diversity (cont.)**

#	Strategies for Cultural, Linguistic, or Economic Diversity	Students	Teachers	Others
B12	Offer "flexible" opportunities for parent involvement including home learning activities and other activities that don't require parents to come to the school	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B13	Provide child care for parents participating in school activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B14	Acknowledge and include family members' diverse skills, talents, and knowledge in school activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B15	Provide adult education, including high school equivalency (HSE) and/or ESL classes, or family literacy program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B16	Offer computer literacy courses for parents and other program beneficiaries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B17	Conduct an outreach program for traditionally "hard to reach" parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B18	Coordinate with community centers/programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B19	Seek collaboration/assistance from business, industry, or institutions of higher education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B20	Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of race, national origin, and color	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B21	Ensure compliance with the requirements in Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, national origin, and color	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B22	Ensure students, teachers, and other program beneficiaries are informed of their rights and responsibilities with regard to participation in the program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B23	Provide mediation training on a regular basis to assist in resolving disputes and complaints	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Gang-Related Activities**

#	Strategies for Gang-Related Activities	Students	Teachers	Others
C01	Provide early intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C02	Provide counseling	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C03	Conduct home visits by staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C04	Provide flexibility in scheduling activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C05	Recruit volunteers to assist in promoting gang-free communities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C06	Provide mentor program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C07	Provide before/after school recreational, instructional, cultural, or artistic programs/activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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**Schedule #18—Equitable Access and Participation (cont.)**

County-District Number or Vendor ID:

Amendment number (for amendments only):

**Barrier: Gang-Related Activities (cont.)**

#	Strategies for Gang-Related Activities	Students	Teachers	Others
C08	Provide community service programs/activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C09	Conduct parent/teacher conferences	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C10	Strengthen school/parent compacts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C11	Establish collaborations with law enforcement agencies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C12	Provide conflict resolution/peer mediation strategies/programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C13	Seek collaboration/assistance from business, industry, or institutions of higher education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C14	Provide training/information to teachers, school staff, and parents to deal with gang-related issues	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
C99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Drug-Related Activities**

#	Strategies for Drug-Related Activities	Students	Teachers	Others
D01	Provide early identification/intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D02	Provide counseling	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D03	Conduct home visits by staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D04	Recruit volunteers to assist in promoting drug-free schools and communities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D05	Provide mentor program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D06	Provide before/after school recreational, instructional, cultural, or artistic programs/activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D07	Provide community service programs/activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D08	Provide comprehensive health education programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D09	Conduct parent/teacher conferences	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D10	Establish school/parent compacts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D11	Develop/maintain community collaborations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D12	Provide conflict resolution/peer mediation strategies/programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D13	Seek collaboration/assistance from business, industry, or institutions of higher education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D14	Provide training/information to teachers, school staff, and parents to deal with drug-related issues	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
D99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Visual Impairments**

#	Strategies for Visual Impairments	Students	Teachers	Others
E01	Provide early identification and intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E02	Provide program materials/information in Braille	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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**Schedule #18—Equitable Access and Participation (cont.)**

County-District Number or Vendor ID:

Amendment number (for amendments only):

**Barrier: Visual Impairments**

#	Strategies for Visual Impairments	Students	Teachers	Others
E03	Provide program materials/information in large type	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E04	Provide program materials/information in digital/audio formats	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E05	Provide staff development on effective teaching strategies for visual impairment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E06	Provide training for parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E07	Format materials/information published on the internet for ADA accessibility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
E99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Hearing Impairments**

#	Strategies for Hearing Impairments			
F01	Provide early identification and intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F02	Provide interpreters at program activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F03	Provide captioned video material	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F04	Provide program materials and information in visual format	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F05	Use communication technology, such as TDD/relay	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F06	Provide staff development on effective teaching strategies for hearing impairment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F07	Provide training for parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Learning Disabilities**

#	Strategies for Learning Disabilities	Students	Teachers	Others
G01	Provide early identification and intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
G02	Expand tutorial/mentor programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
G03	Provide staff development in identification practices and effective teaching strategies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
G04	Provide training for parents in early identification and intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
G99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Other Physical Disabilities or Constraints**

#	Strategies for Other Physical Disabilities or Constraints	Students	Teachers	Others
H01	Develop and implement a plan to achieve full participation by students with other physical disabilities or constraints	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
H02	Provide staff development on effective teaching strategies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
H03	Provide training for parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
H99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**Barrier: Inaccessible Physical Structures**

#	Strategies for Inaccessible Physical Structures	Students	Teachers	Others
J01	Develop and implement a plan to achieve full participation by students with other physical disabilities/constraints	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
J02	Ensure all physical structures are accessible	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
J99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Absenteeism/Truancy**

#	Strategies for Absenteeism/Truancy	Students	Teachers	Others
K01	Provide early identification/intervention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K02	Develop and implement a truancy intervention plan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K03	Conduct home visits by staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K04	Recruit volunteers to assist in promoting school attendance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K05	Provide mentor program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K06	Provide before/after school recreational or educational activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K07	Conduct parent/teacher conferences	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K08	Strengthen school/parent compacts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K09	Develop/maintain community collaborations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K10	Coordinate with health and social services agencies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K11	Coordinate with the juvenile justice system	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K12	Seek collaboration/assistance from business, industry, or institutions of higher education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
K99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: High Mobility Rates**

#	Strategies for High Mobility Rates	Students	Teachers	Others
L01	Coordinate with social services agencies	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
L02	Establish collaborations with parents of highly mobile families	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
L03	Establish/maintain timely record transfer system	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
L99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Lack of Support from Parents**

#	Strategies for Lack of Support from Parents	Students	Teachers	Others
M01	Develop and implement a plan to increase support from parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M02	Conduct home visits by staff	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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**Barrier: Lack of Support from Parents (cont.)**

#	Strategies for Lack of Support from Parents	Students	Teachers	Others
M03	Recruit volunteers to actively participate in school activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M04	Conduct parent/teacher conferences	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M05	Establish school/parent compacts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M06	Provide parenting training	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M07	Provide a parent/family center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M08	Provide program materials/information in home language	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M09	Involve parents from a variety of backgrounds in school decision making	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M10	Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M11	Provide child care for parents participating in school activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M12	Acknowledge and include family members' diverse skills, talents, and knowledge in school activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M13	Provide adult education, including HSE and/or ESL classes, or family literacy program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M14	Conduct an outreach program for traditionally "hard to reach" parents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M15	Facilitate school health advisory councils four times a year	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Shortage of Qualified Personnel**

#	Strategies for Shortage of Qualified Personnel	Students	Teachers	Others
N01	Develop and implement a plan to recruit and retain qualified personnel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N02	Recruit and retain personnel from a variety of racial, ethnic, and language minority groups	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N03	Provide mentor program for new personnel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N04	Provide intern program for new personnel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N05	Provide an induction program for new personnel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N06	Provide professional development in a variety of formats for personnel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N07	Collaborate with colleges/universities with teacher preparation programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Lack of Knowledge Regarding Program Benefits**

#	Strategies for Lack of Knowledge Regarding Program Benefits	Students	Teachers	Others
P01	Develop and implement a plan to inform program beneficiaries of program activities and benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
P02	Publish newsletter/brochures to inform program beneficiaries of activities and benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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**Barrier: Lack of Knowledge Regarding Program Benefits (cont.)**

#	Strategies for Lack of Knowledge Regarding Program Benefits	Students	Teachers	Others
P03	Provide announcements to local radio stations, newspapers, and appropriate electronic media about program activities/benefits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
P99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Lack of Transportation to Program Activities**

#	Strategies for Lack of Transportation	Students	Teachers	Others
Q01	Provide transportation for parents and other program beneficiaries to activities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Q02	Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Q03	Conduct program activities in community centers and other neighborhood locations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Q99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Barrier: Other Barriers**

#	Strategies for Other Barriers	Students	Teachers	Others
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			

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